

AF/IFW

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Serial No.: 09/636,146 Confirmation No.: 6582
Applicant: Mark CHASIN, et al.
Filed: August 10, 2000
Art Unit: 1617
Examiner: Sang-Ming Hui
For: **Novel Hypoxanthine and Thiohypoxanthine**
Attorney Docket No.: 332.1106
Customer No.: 23280

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

February 28, 2005

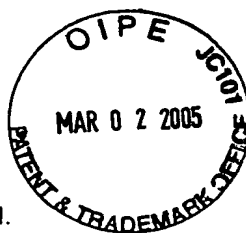
AMENDMENT

Sir:

In response to the Office Action of November 30, 2004, please reconsider the above-identified patent application based on the following amendments and remarks:

Amendments to the Claims begin on page 2 of this document.

Remarks and Arguments begin on page 6 of this document.

COMMISSIONER FOR PATENTS
P.O. BOX 1450
Alexandria, VA 22313-140

In re application of: CHASIN, et al.
 Serial No.: 09/636,146
 Filed: August 10, 2000
 For: **NOVEL HYPOXANTHINE AND THIOHYPOXANTHINE**

S i r:

Transmitted herewith is an **Amendment** in the above-identified application.

- [] Small entity status under 37 C.F.R. 1.9 and 1.27 has been previously established.
 [] Applicants assert small entity status under 37 C.F.R. 1.9 and 1.27.
 [X] No fee for additional claims is required.
 [] A filing fee for additional claims calculated as shown below, is required:

FOR:	(Col. 1)	(Col. 2)	SMALL ENTITY		OR	LARGE ENTITY	
	REMAINING	HIGHEST	RATE	FEE		RATE	FEE
	AFTER	PREVIOUSLY					
	AMENDMENT	PAID FOR					
TOTAL CLAIMS	0 Minus	0 =					
INDEP. CLAIMS	0 Minus	0 =					
[] FIRST PRESENTATION OF MULTIPLE DEP. CLAIM							
			x \$ 9	\$		x \$ 18	\$
			x \$ 42	\$		x \$ 84	\$
			+ \$140	\$		+ \$280	\$

TOTAL: \$ OR TOTAL: \$

- * If the entry in Co. 1 is less than the entry in Col. 2, write "0" in Col. 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

- [] Also transmitted herewith are:
 [] Petition for extension under 37 C.F.R. 1.136
 [] Other:
 [] Check(s) in the amount of **\$0.00** is/are attached to cover:
 [] Filing fee for additional claims under 37 C.F.R. 1.16
 [] Petition fee for extension under 37 C.F.R. 1.136
 [] Other:
 [X] The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0552.
 [X] Any filing fee under 37 C.F.R. 1.16 for the presentation of additional claims which are not paid by check submitted herewith.
 [X] Any patent application processing fees under 37 C.F.R. 1.17.
 [X] Any petition fees for extension under 37 C.F.R. 1.136 which are not paid by check submitted herewith, and it is hereby requested that this be a petition for an automatic extension of time under 37 CFR 1.136.


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I hereby certify that this correspondence and/or documents referred to as attached therein and/or fee are being deposited with sufficient postage to the United States Postal Service as "first class mail" in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" on February 28, 2005.
 DAVIDSON, DAVIDSON & KAPPEL, LLC

BY: 